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| Certified Copies | Certificates of Status |
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| Special instructions to Fi | ling Officer: |
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COVER LETTER

TO: Amendment Section

| Division of Corporations | | | |
|--|--|--|--|
| SUBJECT: DISSOLUTION OF COrporation | | | |
| DOCUMENT NUMBER: | | | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | | | |
| Please return all correspondence concerning this matter to the following: | | | |
| John Miller (Name of Contact Person) | | | |
| Trage outfittes of Tampa (Firm/Company) | | | |
| 3331 W. Main St (Address) | | | |
| Tampa FL 33607 (City/State and Zip Code) | | | |
| For further information concerning this matter, please call: | | | |
| John Miller at (813) 917-7250 (Name of Contact Person) (Area Code & Daytime Telephone Number) | | | |
| Enclosed is a check for the following amount: | | | |
| \$\text{\$\subseteq}\$\$ \$\$\ | | | |
| MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle | | | |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

| FIRST: | The name of the corporation as currently filed with the Florida Department of | State: | |
|---------|--|--------------------|---|
| | Image outfitters of Tampa, Inc. | | |
| SECOND: | The document number of the corporation (if known): | | |
| THIRD: | The date dissolution was authorized: 12-31-27 | | |
| | Effective date of dissolution <u>if applicable:</u> (no more than 90 days after dissolution | file date) | |
| FOURTH: | Adoption of Dissolution (CHECK ONE) | | |
| | Dissolution was approved by the shareholders. The number of votes cast to was sufficient for approval. | or diss | olution |
| | Dissolution was approved by the shareholders through voting groups. | | |
| | The following statement must be separately provided for each voting group en to vote separately on the plan to dissolve: | ntitled | |
| | The number of votes cast for dissolution was sufficient for approval by | | |
| | (voting group) | | |
| | Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) (Typed or printed name of person signing) | 09 JAN 30 PM 4: 06 | FILED SECRETARY OF STATE DIVISION OF CORPORATIONS |
| | (Title of person signing) | | |

Filing Fee: \$35

Notice of Corporate Dissolution

Image outfitters of Tampa, INC.

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

| Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. |
|--|
| Description of information that must be included in a claim: |
| COMPANY WAS CLOSED DUE to |
| A LACK OF BUSINESS |
| |
| · · · · · · · · · · · · · · · · · · · |
| |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) |
| Image outfillers of Tampa |
| Imge Outfillers of Tampa 3331 W. Main St. |
| Tampa, FL 33607 |
| |

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A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced

within 4 years after the filing of this notice.